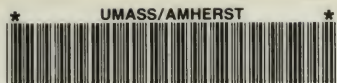


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# KNOW YOUR RIGHTS

***Protection for Medicare  
Hospital Patients***

GOVERNMENT DOCUMENTS  
COLLECTION

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**Advocacy Office  
Massachusetts Department of Public Health**

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## A Message to Massachusetts Medicare Patients

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You as a Medicare hospital patient are protected from discrimination. Massachusetts law (Chapter 111, Section 51D) guarantees that you will get acute hospital care when you need it and that you will be treated the same as non-Medicare patients.

The law prohibits hospitals from discriminating against you because of the DRG (Diagnosis Related Group) classification or seriousness of your illness, the cost of your treatment, the expected length of your hospital stay, or any other factor that is not applied equally to all patients with similar medical needs.

Acute care hospitals must not:

- refuse to admit you when you need hospital care;
- discharge or transfer you from the hospital before you are medically ready; or
- provide less treatment than you need.

Hospitals must give you a written copy of your rights under this law. These rights also must be posted conspicuously throughout the hospital.

You have the right to ask about your treatment and to participate in planning for your care. Both before and during your hospital stay, ask your doctor about the procedures you will undergo. You also should ask about how long you should expect to be in the hospital.

The Department of Public Health is committed to guaranteeing that all Medicare patients get hospital services when they need them. If you have any questions about your rights as a Medicare patient, please contact the Advocacy Office.



Deborah Prothrow-Stith, M.D.  
Commissioner

## The Advocacy Office

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The Department of Public Health's Advocacy Office was set up to receive, investigate and resolve complaints about hospital discrimination against Medicare patients. Medicare patients, family members, or friends can file a complaint with the Advocacy Office.

The Advocacy Office investigates complaints to find out if the law protecting Medicare patients has been violated. The investigation includes contacting the hospital and the patient's doctor. If warranted, the Advocacy Office steps in to make sure that the health and safety of the Medicare patient is protected. Complaints that involve serious and immediate threats to patient health and safety are given the highest priority.

If the Advocacy Office determines that the law has been violated but is unable to resolve the complaint through negotiation, it may take more serious steps to enforce the law, including asking the Attorney General to take legal action.

## Medicare Patients' Rights to Discharge Planning

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Medicare patients also can ask the Advocacy Office to review their hospital discharge plans. Under the Massachusetts discharge planning law, hospitals must write a comprehensive discharge plan for each Medicare patient who will need services after leaving the hospital. A written copy of this plan must be given to the patient at least 24 hours before the scheduled discharge date.

Hospitals also are required to include information about the rights of Medicare patients as part of the discharge plan. The information sheet must include:

- the name and telephone number of the hospital discharge planning coordinator to call if the Medicare patient has problems with services after discharge.
- a place for the patient or his/her representative to sign, acknowledging participation in discharge planning and receipt of a copy of the discharge plan. (This signature does not necessarily mean that the patient agrees to the plan.)
- information about a patient's right to request a conference with the hospital's discharge planning coordinator and the patient's physician in case the patient has problems with the discharge plan.
- information about a patient's right to ask the Advocacy Office to review the discharge plan if his or her problems with it are not resolved through the conference.

Medicare patients cannot be discharged until they have agreed to their discharge plans or, if a review has been requested, until the Advocacy Office has reached a decision.

Medicare patients have until noon of the working day after the day they receive their written discharge plan to ask for an Advocacy Office review.

## Facts about DRGs

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The federal government pays acute care hospitals for Medicare patients through a reimbursement system that uses DRGs (Diagnosis Related Groups).

Under DRGs, hospitals are paid a fixed amount for each type of illness or surgical procedure regardless of how much the patient's care actually costs. This DRG payment system encourages hospitals to provide care in the most efficient and economical manner.

There are no pre-determined lengths of stay under the DRG system. Medicare patients are entitled to be admitted to the hospital and stay there for as long as they need hospital-level services.

If the hospital decides a Medicare patient no longer needs hospital-level care, it gives the patient a written notice stating that Medicare will no longer cover the cost of inpatient care after a specified date. Usually the specified date is the third day after the patient receives the notice.

The notice also tells the patient how to request a review of the hospital's decision about Medicare coverage of the patient's continued hospital stay. This review is conducted by the Peer Review Organization (PRO). Massachusetts Medicare patients can contact MassPRO, Inc., 300 Bear Hill Road, Waltham, MA 02154, (617) 890-0011.



# **How to File a Complaint or Request a Review of Your Discharge Plan**

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## **Call:**

**(617) 727-8984**

**(9-5, Monday-Friday)**

**1-800-462-5540**

**(24-Hour Hotline)**

## **Or Write:**

**Advocacy Office**

**Department of Public Health**

**80 Boylston Street, Suite 1100**

**Boston, MA 02116**